

031904

13281 U.S. PTO

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 250681US2

First Inventor or Application Identifier Tomoaki ENOKIDA

Title DIGITAL CERTIFICATE MANAGEMENT SYSTEM, DIGITAL CERTIFICATE
MANAGEMENT APPARATUS, DIGITAL CERTIFICATE MANAGEMENT METHOD,
PROGRAM AND COMPUTER READABLE INFORMATION RECORDING MEDIUM

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification Total Sheets
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets
4. ☐ Oath or Declaration Total Pages
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation/divisional with box 17 completed)
- i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in
the prior application, see 37 C.F.R. §1.63(d)(2) and
1.33(b).
5. ☐ CD-ROM or CD-R in duplicate, large table or Computer
Program (Appendix)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification or Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ Paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☒ Application Data Sheet. See 37 CFR 1.76
9. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of
(when there is an assignee) Attorney
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PTO-1449 Citations
12. ☐ Preliminary Amendment
13. ☒ White Advance Serial No. Postcard
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☐ Applicant claims small entity status.
See 37 CFR 1.27
16. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.


18. CORRESPONDENCE ADDRESS

Customer Number

22850

(703) 413-3000

FACSIMILE: (703) 413-2220

Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:		Date:	3/19/04
Name:	C. Irvin McClelland	Registration No.:	

C. Irvin McClelland
Registration Number 21,12417510 U.S. PTO
10/804097

031904



Docket No. 250681US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Tomoaki ENOKIDA

SERIAL NO: New Application

FILING DATE: Herewith

FOR: DIGITAL CERTIFICATE MANAGEMENT SYSTEM, DIGITAL CERTIFICATE MANAGEMENT APPARATUS, DIGITAL CERTIFICATE MANAGEMENT METHOD, PROGRAM AND COMPUTER READABLE INFORMATION RECORDING MEDIUM

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

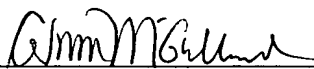
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	77 - 20 =	57	x \$18 =	\$1,026.00
INDEPENDENT CLAIMS	25 - 3 =	22	x \$86 =	\$1,892.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$770.00
TOTAL OF ABOVE CALCULATIONS				\$3,818.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$3,818.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ Credit card payment form is attached to cover the filing fee in the amount of **\$3,818.00**
- ☒ The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 3/19/04


Marvin J. Spivak

Registration No. 24,913

C. Irvin McClelland
Registration Number 21,124

Customer Number

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)